

Patricia Booker

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/578103

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/				
3		/				
4		/				
5		/				
6		/				
7		60	1			
8		60				
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TOTAL IND.	1	↓	2	↓		↓
TOTAL DEP.	23	←	7	←		←
TOTAL CLAIMS	24		9			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL						